

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	70205	4-25-00
O.I.P.E. CLASSIFIER		49	5/3/00
FORMALITY REVIEW	CA	1290112	6/27/00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 (Through numeral) ..... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	0	0	9-2-03
2	0	0	2-15-04
3	0	0	6-27-04
4	0	0	2-11-05
5	0	0	
6	0	0	
7	0	0	
8	0	0	
9	0	0	
10	0	0	
11	0	0	
12	0	0	
13	0	0	
14	0	0	
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39	0	0	
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41	0	0	
42	0	0	
43	0	0	
44	0	0	
45	0	0	
46	0	0	
47	0	0	
48	0	0	
49	0	0	
50	0	0	

Claim	Final	Original	Date
51	0	0	9-2-03
52	0	0	2-16-04
53	0	0	6-27-04
54	0	0	2-11-05
55	0	0	
56	0	0	
57	0	0	
58	0	0	
59	0	0	
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93	0	0	
94	0	0	
95	0	0	
96	0	0	
97	0	0	
98	0	0	
99	0	0	
100	0	0	

Claim	Final	Original	Date
101	0	0	
102	0	0	
103	0	0	
104	0	0	
105	0	0	
106	0	0	
107	0	0	
108	0	0	
109	0	0	
110	0	0	
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119	0	0	
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122	0	0	
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124	0	0	
125	0	0	
126	0	0	
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143	0	0	
144	0	0	
145	0	0	
146	0	0	
147	0	0	
148	0	0	
149	0	0	
150	0	0	

Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here

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